Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF OHIO	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

## Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
	-	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Chaquitta First name M.	First name
	Bring your picture identification to your meeting with the trustee.	Middle name  Carter  Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-5179	

		About Debtor 1:	Ab	pout Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.		I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Bu	isiness name(s)
		EINs	EII	Ns
5.	Where you live	30901 Lakeshore Blvd #1102	lf I	Debtor 2 lives at a different address:
		Willowick, OH 44095  Number, Street, City, State & ZIP Code	Νι	umber, Street, City, State & ZIP Code
		Lake		
		County	Cc	punty
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	in	Debtor 2's mailing address is different from yours, fill it here. Note that the court will send any notices to this ailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Nu	umber, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Cł	neck one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		I have another reason. Explain. (See 28 U.S.C. § 1408.)

Deb	otor 1 Chaquitta M. Cart	er				Case n	number (if known)	
Par	t 2: Tell the Court About	Your Bank	ruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are	Check on (Form 20		rief description of each, see I go to the top of page 1 and c			C. § 342(b) for Individu	uals Filing for Bankruptcy
	choosing to file under	■ Chapt	ter 7					
		☐ Chapt	ter 11					
		☐ Chapt	ter 12					
		☐ Chapt	ter 13					
		·						
8.	How you will pay the fee	abo ord	out how yo	entire fee when I file my pe u may pay. Typically, if you a attorney is submitting your pa address.	re paying	the fee yourself,	you may pay with cash	, cashier's check, or money
				the fee in installments. If y		e this option, sign	and attach the Applica	ation for Individuals to Pay
		☐ I re	equest that is not requ	e in Installments (Official Forr t my fee be waived (You ma uired to, waive your fee, and i	y request may do so	only if your incor	me is less than 150% o	of the official poverty line that
				ur family size and you are una on to Have the Chapter 7 Filin				
9.	Have you filed for	□ No.						
9.	bankruptcy within the last 8 years?	Yes.						
				Northern District of				
			District	Ohio	When	6/07/17	Case number	17-13336
			District		_ When		Case number	
			District		_ When		Case number	
10.	Are any bankruptcy	■ No						
	cases pending or being filed by a spouse who is	☐ Yes.						
	not filing this case with you, or by a business partner, or by an							
	affiliate?		Debtor				Relationship to y	OU.
			District		When		Case number, if	
			Debtor				Relationship to y	
			District		When		Case number, if	
					_			
11.	Do you rent your	□ No.	Go to li	ne 12.				
	residence?	Yes.	Has yo	ur landlord obtained an evicti	on judgm	ent against you?		
				No. Go to line 12.				
			_	Yes. Fill out <i>Initial Statement</i> bankruptcy petition.	t About ar	Eviction Judgme	ent Against You (Form	101A) and file it with this

Deb	tor 1 Chaquitta M. Cart	er			Case number (if known)
ar	3: Report About Any Bu	ısinesses	You Owi	n as a Sole Proprie	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	e and location of bus	iness
	A sole proprietorship is a				
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numl	ber, Street, City, Stat	te & ZIP Code
	it to this petition.		Chec	k the appropriate bo	x to describe your business:
	·				ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
				None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation in 11 U.S	s. If you in ns, cash-f S.C. 1116	ndicate that you are flow statement, and f (1)(B).	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small business debtor, see 11	■ No.		not filing under Chap	
	U.S.C. § 101(51D).	□ No.	Code	•	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am	filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	: 4: Report if You Own or	· Have An	y Hazardo	ous Property or An	y Property That Needs Immediate Attention
	Do you own or have any	■ No.	<u> </u>		
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is , why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs		Where i	s the property?	
	urgent repairs?				Number, Street, City, State & Zip Code

#### Part 5:

#### Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	tor 1 Chaquitta M. Carte	er		Case number (if I	known)
Part	6: Answer These Questi	ons for R	eporting Purposes		
16.	What kind of debts do you have?	16a.	Are your debts primarily consur individual primarily for a personal,	mer debts? Consumer debts are defined family, or household purpose."	in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		
			Yes. Go to line 17.		
		16b.		ss debts? Business debts are debts that nt or through the operation of the busines	
			☐ No. Go to line 16c.		
			☐ Yes. Go to line 17.		
		16c.	State the type of debts you owe th	at are not consumer debts or business de	ebts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	o to line 18.	
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will	■ Yes.		u estimate that after any exempt property e to distribute to unsecured creditors?	is excluded and administrative expenses
	be available for distribution to unsecured creditors?		Yes		
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-1 □ 200-9	99	☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000
19.	How much do you estimate your assets to be worth?	□ \$100,	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion
20.	How much do you estimate your liabilities to be?	□ \$100,	50,000 001 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion
Pari	7: Sign Below				
For	you	I have ex	camined this petition, and I declare u	under penalty of perjury that the information	on provided is true and correct.
				n aware that I may proceed, if eligible, uncavailable under each chapter, and I choos	
			rney represents me and I did not pa nt, I have obtained and read the noti	y or agree to pay someone who is not an ce required by 11 U.S.C. § 342(b).	attorney to help me fill out this
		I request	relief in accordance with the chapte	er of title 11, United States Code, specifie	d in this petition.
		bankrupt and 3571	cy case can result in fines up to \$25	ealing property, or obtaining money or pro 50,000, or imprisonment for up to 20 years	
		Chaqui	tta M. Carter e of Debtor 1	Signature of Debtor 2	
		Executed	January 9, 2019 MM / DD / YYYY	Executed on MM / DI	D/YYYY

Debtor 1	Chaquitta M. Carter	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Antoinette E. Freeburg	Date	January 9, 2019
Signature of Attorney for Debtor		MM / DD / YYYY
Antoinette E. Freeburg 0071075 Printed name		
Freeburg & Freeburg LLC		
6690 Beta Dr. Suite 214		
Mayfield Village, OH 44143		
Number, Street, City, State & ZIP Code		
Contact phone (440) 421-9181	Email address	toni@freeburglaw.com
0071075 OH		
Bar number & State		

		ation to identify your				
Deb	tor 1	Chaquitta M. Cart	Middle Name	Last Name		
	tor 2 use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Ban	kruptcy Court for the:	NORTHERN DISTRIC	r of ohio		
Cas	e number					
(if kno					_	t if this is an
					amen	ded filing
<b>○</b> tt	::-:-! <b>-</b>	1000				
		m 106Sum	and Liabilities s	nd Certain Statistical Information	•	10/45
Be a infor	s complete ar mation. Fill o original form	nd accurate as possib ut all of your schedule	le. If two married peoples first; then complete t	e are filing together, both are equally responsible information on this form. If you are filing amends the box at the top of this page.	e for supplyir	
ı alı	Julillia	TIZE TOUI ASSELS				
					Your a Value of	ssets of what you own
1.	Schedule A/	B: Property (Official Fo	orm 106A/B)			
	1a. Copy line	55, Total real estate, fr	om Schedule A/B		\$	0.00
	1b. Copy line	62, Total personal prop	perty, from Schedule A/B.		\$	23,716.42
	1c. Copy line	63, Total of all property	on Schedule A/B		. \$	23,716.42
Part	2: Summa	rize Your Liabilities				
						abilities t you owe
2.			aims Secured by Propert nn A, Amount of claim, at	y (Official Form 106D) the bottom of the last page of Part 1 of <i>Schedule D</i>	\$	7,680.00
3.			Unsecured Claims (Official) 1 (priority unsecured clair	al Form 106E/F) ns) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy the	total claims from Part	2 (nonpriority unsecured of	claims) from line 6j of Schedule E/F	\$	72,083.38
				Your total liabiliti	ies \$	79,763.38
Part	3: Summa	rize Your Income and	Expenses		•	
4.		our Income (Official Fo		e /	. \$	4,884.00
5.		Your Expenses (Official onthly expenses from li			\$	5,158.00
Part	4: Answer	These Questions for	Administrative and Stat	istical Records		
6.	Are you filin	g for bankruptcy unde	er Chapters 7, 11, or 13?	,		
	☐ No. You	have nothing to report	on this part of the form. C	Check this box and submit this form to the court with	your other sch	nedules.
_	■ Yes					
7.	What kind of	f debt do you have?				
				debts are those "incurred by an individual primarily 9g for statistical purposes. 28 U.S.C. § 159.	for a personal,	family, or

the court with your other schedules.

page 1 of 2

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Official Form 106Sum

Best Case Bankruptcy

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

6,979.04

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total o	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	39,089.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	39,089.00

- 0.0.0	r 1	Chaquitta N	/I. Carter				
S - I - 1 -	0	First Name		Middle Name	Last Name		
Debto Spouse	r 2 e, if filing)	First Name		Middle Name	Last Name		
Jnited	l States B	ankruptcy Court fo	or the: NORT	HERN DISTRICT OF	OHIO		
Case i	number						☐ Check if this is a
							amended filing
Offic	rial Fo	orm 106A/E	В				
_		le A/B: P		/			12/15
nink it nforma	fits best.	Be as complete and re space is needed	l accurate as po	ssible. If two married p	e. If an asset fits in more than eople are filing together, both On the top of any additional pa	are equally responsible for su	upplying correct
art 1:	Describe	e Each Residence, E	Building, Land,	or Other Real Estate Yo	ou Own or Have an Interest In		
Do y	ou own or	have any legal or e	quitable interes	t in any residence, buil	ding, land, or similar property?	•	
■ N	o. Go to Pa	art 2.					
П	es. Where	is the property?					
) o = ( ) .	Danasika	e Your Vehicles					
o you omeoi Car	u own, leanne else dr	ase, or have legal rives. If you lease a	a vehicle, also		es, whether they are regist G: Executory Contracts and		ehicles you own that
o you omeo	u own, lea ne else dr s, vans, t	ase, or have legal rives. If you lease a	a vehicle, also	report it on Schedule			ehicles you own that
o you omeo . Car	u own, lea ne else dr s, vans, t	ase, or have legal rives. If you lease a	a vehicle, also	report it on <i>Schedule</i> i		Unexpired Leases.  Do not deduct secured cl	laims or exemptions. Put
o you omeon . Car 	Jown, leanne else dr s, vans, t lo Yes Make: Model:	ase, or have legal rives. If you lease a rucks, tractors, s Saturn Aura	a vehicle, also	who has an interest	G: Executory Contracts and	Do not deduct secured clube amount of any secure	ŕ
o you omeon . Car 	Jown, leanne else dr s, vans, t lo es Make: Model: Year:	sase, or have legal rives. If you lease a rucks, tractors, s  Saturn  Aura 2008	a vehicle, also	who has an interest Debtor 1 only Debtor 2 only	G: Executory Contracts and of the property? Check one	Do not deduct secured cl the amount of any secure Creditors Who Have Clair	laims or exemptions. Put ed claims on Schedule D:
omeoi . Car □ N ■ Y	Jown, leanne else dr s, vans, t lo es Make: Model: Year:	sase, or have legal rives. If you lease a rucks, tractors, s  Saturn  Aura  2008  ate mileage:	a vehicle, also	who has an interest	in the property? Check one	Do not deduct secured of the amount of any secure Creditors Who Have Clair	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.  Current value of the
o you omeon . Car 	Jown, leane else dr s, vans, t lo es Make: Model: Year: Approxima	sase, or have legal rives. If you lease a rucks, tractors, s  Saturn  Aura  2008  ate mileage:	a vehicle, also	who has an interest Debtor 1 only Debtor 2 only Debtor 1 and Debt	in the property? Check one or 2 only debtors and another	Do not deduct secured cl the amount of any secure Creditors Who Have Clair	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.  Current value of the
o you omeon . Car 	Jown, leane else dr s, vans, t lo es Make: Model: Year: Approxima Other infor	Saturn Aura 2008 ate mileage:	a vehicle, also	who has an interest Debtor 1 only Debtor 2 only Debtor 1 and Debt At least one of the Check if this is co	in the property? Check one or 2 only debtors and another	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$2,500.00  Do not deduct secured of the amount of any secure	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.  Current value of the portion you own?  \$2,500.00
o you common of the property o	Jown, leane else drome else drome else drome, s, vans, t else drome.  Make: Model: Year: Approxima Other information.  Make: Model:	Saturn Aura 2008 ate mileage: rmation:  Dodge Magnum	a vehicle, also	who has an interest Debtor 1 only Debtor 2 only Debtor 1 and Debt At least one of the Check if this is co (see instructions) Who has an interest Debtor 1 only	in the property? Check one or 2 only debtors and another ommunity property	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$2,500.00  Do not deduct secured of the amount of any secure Creditors Who Have Clair	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.  Current value of the portion you own?  \$2,500.00  laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.
o you common of the property o	Make: Model: Year: Model: Year: Model: Year: Model: Year:	Saturn Aura 2008 ate mileage:	a vehicle, also	who has an interest Debtor 1 only Debtor 2 only Debtor 1 and Debt At least one of the Check if this is constructions)  Who has an interest	in the property? Check one or 2 only debtors and another community property in the property? Check one	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$2,500.00  Do not deduct secured of the amount of any secure	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.  Current value of the portion you own?  \$2,500.00
o you pameon . Carr	Make: Model: Year: Model: Year: Model: Year: Model: Year:	Saturn Aura 2008 ate mileage: magnum 2008 ate mileage:	95,000	who has an interest Debtor 1 only Debtor 2 only Debtor 1 and Debt At least one of the Check if this is co (see instructions)  Who has an interest Debtor 1 only Debtor 2 only	in the property? Check one or 2 only debtors and another ommunity property in the property? Check one	Do not deduct secured of the amount of any secure Creditors Who Have Clair  Current value of the entire property?  \$2,500.00  Do not deduct secured of the amount of any secure Creditors Who Have Clair  Current value of the	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.  Current value of the portion you own?  \$2,500.00  laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.  Current value of the
o you pameon . Carr	Make: Model: Year: Approxima Model: Year: Approxima	Saturn Aura 2008 ate mileage: magnum 2008 ate mileage:	95,000	who has an interest Debtor 1 only Debtor 1 and Debt At least one of the Check if this is co (see instructions)  Who has an interest Debtor 1 only Debtor 2 only Debtor 2 only	in the property? Check one or 2 only debtors and another ommunity property in the property? Check one	Do not deduct secured of the amount of any secure Creditors Who Have Clair  Current value of the entire property?  \$2,500.00  Do not deduct secured of the amount of any secure Creditors Who Have Clair  Current value of the	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.  Current value of the portion you own?  \$2,500.0  laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.  Current value of the portion you own?
O you observed a served of the control of the contr	Make: Model: Year: Approxima Model: Year: Approxima	Saturn Aura 2008 ate mileage: magnum 2008 ate mileage:	95,000	who has an interest Debtor 1 only Debtor 2 only Debtor 1 and Debt At least one of the  Check if this is co (see instructions)  Who has an interest Debtor 1 only Debtor 2 only Debtor 1 only Check if this is co (see instructions)	in the property? Check one or 2 only debtors and another ommunity property in the property? Check one	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$2,500.00  Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.  Current value of the portion you own?  \$2,500.00  laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.  Current value of the
o you pomeon  Can  N  Y  3.1	Make: Model: Year: Approxima Other infor	Saturn Aura 2008 ate mileage: rmation:  Dodge Magnum 2008 ate mileage: rmation:	95,000	who has an interest Debtor 1 only Debtor 2 only Debtor 1 and Debt At least one of the Debtor 1 only Debtor 2 only At least one of the Check if this is concept (see instructions)  Who has an interest Debtor 1 only Debtor 2 only Debtor 1 and Debt At least one of the Check if this is concept (see instructions)	in the property? Check one or 2 only debtors and another ommunity property in the property? Check one	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$2,500.00  Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$3,500.00	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.  Current value of the portion you own?  \$2,500.0  laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.  Current value of the portion you own?

Official Form 106A/B Schedule A/B: Property

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Best Case Bankruptcy

page 1

D	ebtor 1 Ch	aquitta M. Carter	Case number (if known)	
5		ar value of the portion you own for all of your entries fro lave attached for Part 2. Write that number here		\$6,000.00
		V. B		
		e Your Personal and Household Items have any legal or equitable interest in any of the followi	ng items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.		noods and furnishings lajor appliances, furniture, linens, china, kitchenware		
	■ Yes. Desc	Household Goods		\$4,000.00
7.		elevisions and radios; audio, video, stereo, and digital equipr ncluding cell phones, cameras, media players, games cribe	nent; computers, printers, scanners; music col	lections; electronic devices
8.		of value ntiques and figurines; paintings, prints, or other artwork; bool ther collections, memorabilia, collectibles	ংs, pictures, or other art objects; stamp, coin, c	or baseball card collections;
	☐ Yes. Desc	cribe		
9.	Examples: Sp	or sports and hobbies ports, photographic, exercise, and other hobby equipment; b nusical instruments	icycles, pool tables, golf clubs, skis; canoes ar	nd kayaks; carpentry tools;
	■ No □ Yes. Desc	cribe		
10.	■ No	Pistols, rifles, shotguns, ammunition, and related equipment		
	☐ Yes. Desc	cribe		
11.	. Clothes Examples: E □ No ■ Yes. Desc	Everyday clothes, furs, leather coats, designer wear, shoes, cribe	accessories	
				<b>*</b> ***********************************
		Wearing Apparel		\$600.00
12.	. <b>Jewelry</b> Examples: E □ No ■ Yes. Desc	Everyday jewelry, costume jewelry, engagement rings, wedd	ing rings, heirloom jewelry, watches, gems, go	ld, silver
		Misc. Jewelry		\$900.00
13.	. Non-farm ar Examples: [ No	Dogs, cats, birds, horses		
14.	■ No	personal and household items you did not already list, in	cluding any health aids you did not list	
		specific information		

Official Form 106A/B Schedule A/B: Property page 2 Software Copyright (c) 1996-2018 Best Case, LLC - www.bestcase.com

Debtor 1	Chaquitta M. Carte	er	Case number (if known)	
			t 3, including any entries for pages you have attached	\$5,500.00
Part 4:	Describe Your Financial Ass	ets		
	own or have any legal or		ny of the following?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
□ No	mples: Money you have in		e, in a safe deposit box, and on hand when you file your petiti	on
			Cash	\$30.00
□ No	institutions. If you h	ave multiple accounts w	nts; certificates of deposit; shares in credit unions, brokerage ith the same institution, list each.  Institution name:  Dollar Bank (negative)	houses, and other similar
	17.1	Checking	Dollar Bank (negative)	
	17.2	Savings	Dollar Bank	\$0.00
	17.3	Savings	Century Federal Credit Union	\$6.42
			erage firms, money market accounts	
☐ Ye	S	Institution or issuer na	me:	
	venture	d interests in incorpora	ated and unincorporated businesses, including an interes	et in an LLC, partnership, and
	s. Give specific information	n about themame of entity:	 % of ownership:	
Neg	otiable instruments include -negotiable instruments are	personal checks, cashi	able and non-negotiable instruments ers' checks, promissory notes, and money orders. efer to someone by signing or delivering them.	
☐ Ye	s. Give specific information	n about them suer name:		
	•		3(b), thrift savings accounts, or other pension or profit-sharing	plans
■ Ye	s. List each account separa Type	ately. e of account:	Institution name:	
	401	k	Fidelity	\$11,380.00

Official Form 106A/B Schedule A/B: Property page 3

Debtor 1	Chaquitta M. Carter	Case number (if know	vn)
Your		ade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications com	panies, or others
Yes		Institution name or individual:	
	Rent	Security Deposit	\$800.00
■ No	ities (A contract for a periodic payment o	f money to you, either for life or for a number of years)	
24. Interes	sts in an education IRA, in an account	in a qualified ABLE program, or under a qualified state tuition	program.
26 U.S ■ No	s.C. §§ 530(b)(1), 529A(b), and 529(b)(1)		
☐ Yes	Institution name and des	cription. Separately file the records of any interests.11 U.S.C. § 521	(c):
■ No		erty (other than anything listed in line 1), and rights or powers o	exercisable for your benefit
	<ul> <li>Give specific information about them</li> <li>ts, copyrights, trademarks, trade secr</li> </ul>	ote, and other intellectual property	
		proceeds from royalties and licensing agreements	
☐ Yes	. Give specific information about them		
	ses, franchises, and other general inta nples: Building permits, exclusive licenses	angibles s, cooperative association holdings, liquor licenses, professional lice	enses
☐ Yes	. Give specific information about them		
Money or	r property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28. <b>Tax re</b>	efunds owed to you		
■ No □ Yes	. Give specific information about them, ir	cluding whether you already filed the returns and the tax years	
	y support aples: Past due or lump sum alimony, spo	ousal support, child support, maintenance, divorce settlement, prope	erty settlement
	. Give specific information		
	amounts someone owes you aples: Unpaid wages, disability insurance benefits; unpaid loans you made to	payments, disability benefits, sick pay, vacation pay, workers' como someone else	pensation, Social Security
	. Give specific information		
	sts in insurance policies aples: Health, disability, or life insurance;	health savings account (HSA); credit, homeowner's, or renter's insu	urance
■ Yes	. Name the insurance company of each p Company name:	policy and list its value.  Beneficiary:	Surrender or refund value:
	Term Life Insu	rance through Employer	\$0.00

Official Form 106A/B Schedule A/B: Property page 4

De	btor 1	Chaquitta M. Carter	Case number (if known)	
	If you a		you from someone who has died rust, expect proceeds from a life insurance policy, or are currently entitled to rec	eive property because
	■ No			
	☐ Yes.	Give specific information		
	<i>Examp</i> □ No	oles: Accidents, employment d	ner or not you have filed a lawsuit or made a demand for payment isputes, insurance claims, or rights to sue	
	Yes.	Describe each claim		
			Personal Injury Claim (motor vehicle accident) Case Pending Jason Ralls, Esq. 11811 Shaker Blvd #420 , Shaker Heights, OH 44120	Unknown
	Other o	contingent and unliquidated	claims of every nature, including counterclaims of the debtor and rights to	o set off claims
		Describe each claim		
	-	ancial assets you did not al	ready list	
	■ No			
	⊔ Yes.	Give specific information		
36			entries from Part 4, including any entries for pages you have attached	\$12,216.42
Pa	rt 5: Des	scribe Any Business-Related Pro	operty You Own or Have an Interest In. List any real estate in Part 1.	
37.	Do you o	own or have any legal or equitab	ole interest in any business-related property?	
ı	No. Go	to Part 6.		
	☐ Yes. G	Go to line 38.		
Pa		scribe Any Farm- and Commerci ou own or have an interest in farmi	ial Fishing-Related Property You Own or Have an Interest In. land, list it in Part 1.	
46.	Do you	own or have any legal or ec	quitable interest in any farm- or commercial fishing-related property?	
	■ No.	Go to Part 7.		
	☐ Yes.	. Go to line 47.		
Pa	rt 7:	Describe All Property You Ow	n or Have an Interest in That You Did Not List Above	
	_Examp	have other property of any bles: Season tickets, country cl	kind you did not already list? lub membership	
	■ No □ Yes.	Give specific information		
54	. Add t	he dollar value of all of your	entries from Part 7. Write that number here	\$0.00

Official Form 106A/B Schedule A/B: Property page 5

Debtor 1	Chaquitta M. Carter		Case number (if known)	
Part 8:	List the Totals of Each Part of this Form			
55. <b>Pa</b> i	rt 1: Total real estate, line 2			\$0.00
56. <b>Pa</b> ı	rt 2: Total vehicles, line 5	\$6,000.00		
57. <b>Pa</b> ı	rt 3: Total personal and household items, line 15	\$5,500.00		
58. <b>Pa</b> ı	rt 4: Total financial assets, line 36	\$12,216.42		
59. <b>Pa</b> ı	rt 5: Total business-related property, line 45	\$0.00		
60. <b>Pa</b> i	rt 6: Total farm- and fishing-related property, line 52	\$0.00		
61. <b>Pa</b> i	rt 7: Total other property not listed, line 54	+ \$0.00		
62. <b>Tot</b>	tal personal property. Add lines 56 through 61	\$23,716.42	Copy personal property total	\$23,716.42
63. <b>To</b> t	tal of all property on Schedule A/B. Add line 55 + line 62			\$23,716.42

Schedule A/B: Property Official Form 106A/B page 6 Best Case Bankruptcy

Fill in this inform	ation to identify your	case:			
Debtor 1	Chaquitta M. Cart	er			
	First Name	Middle Name	Last Name	_	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF OHIO		
Case number					☐ Check if this is an amended filing
					amended ming

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

1.	Which set of exemp	otions are v	ou claiming?	Check one only	even if	vour spouse is	filing with	vou.
٠.	William Set of excili	onono are y	ou olullilling.	Official officially	CVCIIII	your spouse is	IIIIII 19 VVIIII	you.

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
2008 Saturn Aura 95,000 miles	\$2,500.00		\$2,500.00	Ohio Rev. Code Ann. § 2329.66(A)(2)	
Zino nom concedero / Zi. Ci.			100% of fair market value, up to any applicable statutory limit		
Household Goods Line from Schedule A/B: 6.1	\$4,000.00		\$4,000.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
Line non concede / V.D. G.1			100% of fair market value, up to any applicable statutory limit	2020.00(~)(~)(a)	
Cash Line from Schedule A/B: 16.1	\$30.00		\$30.00	Ohio Rev. Code Ann. § 2329.66(A)(3)	
2.110 110.11 GG/GGGGG/V2.			100% of fair market value, up to any applicable statutory limit	202000(1.7)(0)	
Savings: Century Federal Credit Union	\$6.42		\$6.42	Ohio Rev. Code Ann. § 2329.66(A)(3)	
Line from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit	2020.00(11)(0)	
401k: Fidelity Line from Schedule A/B: 21.1	\$11,380.00		\$11,380.00	Ohio Rev. Code Ann. § 2329.66(A)(17)	
Elle Holli Genedale AVD. 2111			100% of fair market value, up to any applicable statutory limit	2020100(/1)(11)	

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Best Case Bankruptcy

Debto	1 Chaquitta M. Carter		Case number (if known)				
	rief description of the property and line on chedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption			
		Copy the value from Schedule A/B	Check only one box for each exemption.				
	ersonal Injury Claim (motor vehicle ccident)	Unknown	■ \$0.00	Ohio Rev. Code Ann. § 2329.66(A)(12)(c)			
C J: 1 H	ase Pending ason Ralls, Esq. 1811 Shaker Blvd #420 , Shaker eights, OH 44120 ne from <i>Schedule A/B</i> : 33.1		□ 100% of fair market value, up to any applicable statutory limit	2020.00(A)(12)(0)			
	_ ` ` ` ` ` ` `	years after that for ca		,			
	□ No						

Official Form 106C

☐ Yes

Schedule C: The Property You Claim as Exempt

Debtor 1 Chaquitta M. Carter Trist large Middle Name Large Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO  Cases number (# Howard)  Official Form 106D  Schedule D: Creditors Who Have Claims Secured by Property  12/15 Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space a receded, copy the didditional Pipe, If it too, tumber the entires, and attach it to this form. On the top of any additional pages, write your name and case understood to the control of	Fill in this information to identify	YOUR ORGO!				
Debtor 2 (Scanes 4, stilling) Free Name	Fill in this information to identify y	our case:				
Debbor 2   Scheme R Ring   First Name   Middle Name   Last Name	O manquinta im		Last Name			
United States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO  Case number   Case						
Case number   Check if this is an amended filing	(Spouse if, filing) First Name	Middle Name	Last Name		•	
Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property  12/15  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill floor, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).  In owary creditors have claims secured by your property?  No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  Yes, Fill in all of the information below.  Parts II. List All Secured Claims  2. List all secured Claims. If a creditor has more than one secured claim, list the creditor separately and the information below.  Parts II. List All Secured Claims in sightabetical order according to the creditor's name.  2. List all secured Claims. If a creditor has more than one secured claims in the creditor has more than one secured claims. If the creditor has more than one secured claims in the creditor has more than one secured claims. If the creditor has more than one secured claims. If the creditor has more than one secured claims. If the creditor has more than one secured claims in the creditor has more than one secured claims. If the creditor has more than one secured claims. If the creditor has more than one secured claims. If the creditor has more than one secured claims. If the creditor has more than one secured claims. If the creditor has more than one secured claims. If the creditor has more than one secured claims. If the creditor has more than th	United States Bankruptcy Court for the	he: NORTHERN DISTRICT OF	OHIO			
Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property  12/15  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill floor, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).  In owary creditors have claims secured by your property?  No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  Yes, Fill in all of the information below.  Parts II. List All Secured Claims  2. List all secured Claims. If a creditor has more than one secured claim, list the creditor separately and the information below.  Parts II. List All Secured Claims in sightabetical order according to the creditor's name.  2. List all secured Claims. If a creditor has more than one secured claims in the creditor has more than one secured claims. If the creditor has more than one secured claims in the creditor has more than one secured claims. If the creditor has more than one secured claims. If the creditor has more than one secured claims. If the creditor has more than one secured claims in the creditor has more than one secured claims. If the creditor has more than one secured claims. If the creditor has more than one secured claims. If the creditor has more than one secured claims. If the creditor has more than one secured claims. If the creditor has more than one secured claims. If the creditor has more than one secured claims. If the creditor has more than th	Casa numbar					
Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property  12/15  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, lift it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case unumber (if known).  I on any creditors have claims secured by your property?  I No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  I Yes. Fill in all of the information below.  Part III List All Secured Claims  I was a possible to the claim in all phabetical order according in Part 2. As a community debt and the information below.  Part III List All Secured Claims. If a creditor has a particular claim, list the other creditors paparately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As a community of the control of the control of the particular claim, list the other creditors in particular claim. If the other creditors in particular claim, list the other creditors in particular claim, list the other creditors in particular claim.  Poscribe the property that secures the claim:  PO Box 513  Southfield, MI 48037  Number, Sizes City, State & 2p Code  Who owes the debt? Check one.  Debtor 1 only  Debtor 2 only  A least one of the debtors and another Check if this and popy.  Last 4 digits of account number xxxxx  Purchase Money Security					☐ Check	if this is an
Be as complete and accurate as possible. If we married people are filing tegether, both are equally responsible for aupplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).  It is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).  It is no any creditors have claims secured by your property?  No check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  If yes, Fill in all of the information below.  It is all secured claims. If a creditor has a particular claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As a mount of claim post of the claim is list the claims in significant sequence of the claim is list the claims in significant sequence of the claim is list the property that secures the claim. Secure the debt? Check one.  If the date is negative the property that secures the claim is: Check all that apply.  If the date of the debtors and another claim is claim, list the creditor sequence is particular claim. Sectional and claim is claim elaste to a community debt of the debtor 2 only and a claim elaste to a community debt of the debtors and another claim. If the date is a claim elaste to a community debt of the debtor 2 only and a claim elaste to a commun					_	
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No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.	is needed, copy the Additional Page, fill					
No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.   Yes, Fill in all of the information below.	,	by your property?				
Pos. Fill in all of the information below.    Part 1: List All Secured Claims   List All Secured Claims   List All Secured Claims   List Column A   Column B   Amount of claim   Column A			her schedules. Yo	ou have nothing else t	o report on this form	
2. List all secured claims.  2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately rore each claim. If more than one cenditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.  2.1 Credit Acceptance  Describe the property that secures the claim:  2008 Dodge Magnum 135,000 miles  PO Box 513 Southfield, MI 48037 Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 4 and Debtor 2 only At least one of the debtors and another Check all that apply.  Last 4 digits of account number  256 Data Drive Draper, UT 84020 Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Number, Street, City, State & Zip Code  Who owes the debt? Check one.  As of the date you file, the claim is: Check all that apply. Statutory lien (such as tax lien, mechanic's lien) Last 4 digits of account number  XXXX  2.2 Progresive Finance  Describe the property that secures the claim: South file of the debtors and another community debt  As of the date you file, the claim is: Check all that apply.  As of the date you file, the claim is: Check all that apply.  As of the date you file, the claim is: Check all that apply.  As of the date you file, the claim is: Check all that apply.  Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 1 and Debtor 2 only As a greement you made (such as mortgage or secured claims) Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 and Debtor 2 only Debtor 5 and Debtor 2 only Debtor 6 and Debtor 2 only Debtor 7 and Debtor 2 only D	_	•		a nave nouning elect		
2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As amount of claim one creditor has a particular claim, list the other creditors in Part 2. As amount of claim one creditor has a particular claim, list the other creditors in Part 2. As amount of claim one creditor in Part 2. As of the date you file, the claim is: Check all that apply.    Debtor 1 and Debtor 2 only		on below.				
for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As mount of claim by not deduct the value of collateral. \$1,350.00 and v				Column A	Column B	Column C
Creditor's Name   Creditor's	for each claim. If more than one creditor	has a particular claim, list the other cred	ditors in Part 2. As	Do not deduct the	that supports this	portion
PO Box 513 Southfield, MI 48037 Number, Street, City, State & Zip Code Who owes the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Date debt was incurred Draper, UT 84020 Number, Street, City, State & Zip Code Who owes the debt? Check one.  As of the date you file, the claim is: Check all that apply. In agreement you made (such as mortgage or secured car loan) Sectional and chair  Date debt was incurred 2017  Last 4 digits of account number xxxx   Describe the property that secures the claim: \$300.00 \$0.00 \$300.00  Sectional and chair  As of the date you file, the claim is: Check all that apply.  As of the date you file, the claim is: Check all that apply.  Creditor's Name  Describe the property that secures the claim: \$300.00 \$0.00 \$300.00  Sectional and chair  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Number, Street, City, State & Zip Code Unliquidated Disputed Number, Street, City, State & Zip Code Sectional and chair  Sectional and chair  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Purchase Money Secuirty	2.1 Credit Acceptance	Describe the property that secur	res the claim:			· · · · · · · · · · · · · · · · · · ·
Southfield, MI 48037   Number, Street, City, State & Zip Code   Disputed	Creditor's Name	2008 Dodge Magnum 135	,000 miles			
Southfield, MI 48037   Number, Street, City, State & Zip Code   Disputed						
Southfield, MI 48037   Number, Street, City, State & Zip Code   Unliquidated   Disputed	PO Box 513		is: Check all that			
Number, Street, City, State & Zip Code   Disputed						
Who owes the debt? Check one.    Disputed   Nature of lien. Check all that apply.	· · · · · · · · · · · · · · · · · · ·					
□ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 3 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt  Date debt was incurred 2017  Last 4 digits of account number xxxx   Describe the property that secures the claim: \$300.00 \$0.00 \$300.00  Sectional and chair  256 Data Drive Draper, UT 84020 Number, Street, City, State & Zip Code  Who owes the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 3 only □ Debtor 4 only □ Debtor 4 only □ Debtor 5 only □ Debtor 5 only □ Debtor 6 only □ Debtor 1 and Debtor 9 only □ Debtor 1 only □ Debtor 1 and Debtor 9 only □ Debtor 1 only □ Debt		☐ Disputed				
Debtor 2 only	Who owes the debt? Check one.	Nature of lien. Check all that app	oly.			
Debtor 2 only   Debtor 3 and Debtor 2 only   Dudgment lien from a lawsuit   Dudgment lien	Debtor 1 only		as mortgage or seco	ured		
At least one of the debtors and another   Check if this claim relates to a community debt   C	Debtor 2 only	car loan)				
Check if this claim relates to a community debt  Date debt was incurred 2017  Last 4 digits of account number xxxxx   2.2 Progresive Finance  Creditor's Name  Describe the property that secures the claim: \$300.00 \$0.00 \$300.00  Sectional and chair  As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated Disputed  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Other (including a right to offset)  Purchase Money Secuirty  xxxx   \$300.00 \$0.00 \$300.00  \$0.00 \$300.00  \$0.00 \$300.00	_ ′	_ ' ` `	mechanic's lien)			
Date debt was incurred 2017  Last 4 digits of account number xxxxx  2.2 Progresive Finance  Creditor's Name  Describe the property that secures the claim: \$300.00 \$0.00 \$300.00  Sectional and chair  As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated Disputed  Nature of lien. Check all that apply.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Check if this claim relates to a community debt  Describe the property that secures the claim: \$300.00 \$0.00 \$300.00  \$0.00 \$300.00  \$0.00 \$300.00		er	Durchese M	lanav Casuintv		
2.2 Progresive Finance  Creditor's Name  Describe the property that secures the claim: \$300.00 \$0.00 \$300.00  Sectional and chair  As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated Disputed  Nature of lien. Check all that apply.  Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Describe the property that secures the claim: \$300.00 \$0.00 \$300.00  \$0.00 \$300.00  \$0.00 \$300.00  \$0.00 \$300.00		Other (including a right to offse	t) Furchase iv	ioney Security		
Creditor's Name    256 Data Drive	Date debt was incurred 2017	Last 4 digits of account n	umber XXXX			
Creditor's Name    256 Data Drive	December 5	<b>5</b>		<b>*</b> 200 00	<b>*</b> 0.00	<b>*</b> 200 00
256 Data Drive Draper, UT 84020  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  As of the date you file, the claim is: Check all that apply. Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)  Purchase Money Secuirty			es the claim:	\$300.00	\$0.00	\$300.00
Draper, UT 84020  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien) Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien) Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Unliquidated Disputed Nature of lien. Check all that apply.  Purchase Money Secuirty	ordation of Harmo	Sectional and chair				
Draper, UT 84020  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien) Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien) Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Unliquidated Disputed Nature of lien. Check all that apply.  Purchase Money Secuirty						
Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit  Purchase Money Secuirty			IS: Check all that			
Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit  Other (including a right to offset)  Purchase Money Secuirty	Draper, UT 84020	_ Contingent				
Who owes the debt? Check one.  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan)  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien)  Under (including a right to offset)  Purchase Money Secuirty	Number, Street, City, State & Zip Code	Unliquidated				
□ Debtor 1 only □ An agreement you made (such as mortgage or secured car loan) □ Debtor 2 only □ Statutory lien (such as tax lien, mechanic's lien) □ At least one of the debtors and another □ Check if this claim relates to a community debt □ Other (including a right to offset) □ Purchase Money Secuirty	<b>11</b> 1110 5					
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt □ Check if this claim relates to a	_		•			
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt □ Check if this claim relates to a community debt □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Purchase Money Secuirty		, ,	as mortgage or seco	urea		
☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt ☐ Other (including a right to offset) ☐ Purchase Money Secuirty ☐ Purchase Money Secuirty			manharite P			
☐ Check if this claim relates to a community debt  ☐ Other (including a right to offset)  ☐ Purchase Money Secuirty  ☐ Purchase Money Secuirty			mechanic's lien)			
community debt	_	_ ~	Purchase M	Ionev Secuirty		
Date debt was incurred 2016 Last 4 digits of account number XXXX		- Other (including a right to offse	·	,,		
	Date debt was incurred 2016	Last 4 digits of account n	umber YYYY			

\_\_\_\_\_

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 2

### Debtor 1 Chaquitta M. Carter

First Name Middle Name

Case number (if known)

Add the dollar value of your entries in Column A on this page. Write that number here: \$7,680.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here: \$7,680.00

Last Name

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 2 of 2

Fill in th	is information to identify your c	ase:				
Debtor 1	Chaquitta M. Carte	er				
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if,		Middle Name	Last Name			
(Spouse II,	ming) Thist Name					
United S	tates Bankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO			
Case nu	mber					
(if known)						Check if this is an
					a	mended filing
Officia	I Form 106E/F					
	lule E/F: Creditors W	ha Haya Uncasu	rad Claima			12/15
	plete and accurate as possible. Use					
left. Attacl	D: Creditors Who Have Claims Secun the Continuation Page to this page case number (if known).  List All of Your PRIORITY Uns	e. If you have no information				
	ny creditors have priority unsecured					
_	o. Go to Part 2.	ciamis agamst you:				
☐ Ye	es. ■ List All of Your NONPRIORIT\	/ Uncopured Claims				
	ny creditors have nonpriority unsec					
_						
⊔ No	<ul> <li>You have nothing to report in this pa</li> </ul>	rt. Submit this form to the cou	urt with your other sch	edules.		
■ Ye	es.					
unsed	Ill of your nonpriority unsecured cla cured claim, list the creditor separately one creditor holds a particular claim, list.	for each claim. For each clair	m listed, identify what	type of claim it is. Do r	not list claims already ind	cluded in Part 1. If more
						Total claim
4.1	Advance America	Last 4 digits	of account number	xxxx		\$500.00
	Nonpriority Creditor's Name					
	Attn: Bankruptcy Departmer I35 North Church Street	t When was th	ne debt incurred?	2016		_
	Spartanburg, SC 29306					
_	Number Street City State Zlp Code	As of the dat	e you file, the claim	is: Check all that appl	у	
1	Who incurred the debt? Check one.					
ı	Debtor 1 only	☐ Continger	nt			
I	Debtor 2 only	☐ Unliquidat	ed			
I	Debtor 1 and Debtor 2 only	☐ Disputed				
I	At least one of the debtors and ano	ther Type of NON	PRIORITY unsecure	d claim:		
I	☐ Check if this claim is for a comm	•				
	lebt			aration agreement or d	livorce that you did not	
_	s the claim subject to offset? ■	report as prio	-	ng plans, and other sin	oilar dobts	
	No		·	iy pians, and other Sin	illiai uebis	
	☐Yes	Other Sn	<sub>ecify</sub> Loan			

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 10

Brecksville Surgury Center	Last 4 digits of account number XXXX	\$1,500.0
Nonpriority Creditor's Name		
7001 South Edgerton Road Brecksville, OH 44141	When was the debt incurred? 2016	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did report as priority claims	d not
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical	
Chamberlin College of Nursing	Last 4 digits of account number XXXX	\$3,018.
Nonpriority Creditor's Name 6700 Euclid Ave #201	When was the debt incurred? 2015	
Cleveland, OH 44103 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	onositan dappi,	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did report as priority claims	d not
No	Debts to pension or profit-sharing plans, and other similar debts	
■ No □ Yes		
La res	Other. Specify School Fees	
Citizens Bank	Last 4 digits of account number XXXX	\$2,000.
Nonpriority Creditor's Name 10561 Telegraph Road Glen Allen, VA 23059	When was the debt incurred? 2016	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did report as priority claims	d not
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify <b>Overdraft</b>	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 10

Cleveland Eye Institute	Last 4 digits of account number XXXX	\$4,000
Nonpriority Creditor's Name		
320 Broadway Ave Bedford, OH 44146	When was the debt incurred? 2016	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you di report as priority claims	d not
No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical	
Cornerstone Marriage and Family	Last 4 digits of account number XXXX	\$300
Nonpriority Creditor's Name		
2490 Lee Blvd Cleveland, OH 44118	When was the debt incurred? 2016	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you di	d not
No	report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical	
Dominion East Ohio Gas	Last 4 digits of account number XXXX	\$2,584
Nonpriority Creditor's Name PO Box 5759	When was the debt incurred? 2016	
Cleveland, OH 44101	<u></u>	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you di report as priority claims	d not
■ No	Debts to pension or profit-sharing plans, and other similar debts	
■ No	■ Other. Specify Utilities	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 3 of 10

Dominion Management	Last 4 digits of account number	xxxx	\$1,700.00
Nonpriority Creditor's Name 2905 Northwest Blvd # 1150	When was the debt incurred?	2015	<b>¥ 1,1 2 2 1 2 2</b>
Minneapolis, MN 55441 Number Street City State Zlp Code	As of the date you file, the claim		
Who incurred the debt? Check one.	,,,,,	an anat app.	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify apartment	lease	
Federal Loan Servicing	Last 4 digits of account number	xxxx	\$27,920.00
Nonpriority Creditor's Name PO Box 60610	When was the debt incurred?	2006-2015	
Harrisburg, PA 17106	_		
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 1 only  Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
lebt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	☐ Other. Specify		
	Student Lo	an	
Fifth Third Bank	Last 4 digits of account number	0804	\$425.00
Nonpriority Creditor's Name 5050 Kingsley Drive Cincinnati. OH 45227	When was the debt incurred?	2013-2017	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other. Specify Credit Card	I	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 4 of 10

Chaquitta M. Carter	Case number (if known)	
First Premier Bank	Last 4 digits of account number 6569	\$934.0
Nonpriority Creditor's Name 601 South Minnesota Ave Sioux Falls, SD 57104	When was the debt incurred? 2012-2017	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Credit Card	
GEICO	Last 4 digits of account number XXXX	\$1,100.0
Nonpriority Creditor's Name		
One GEICO Plaza Bethesda, MD 20811	When was the debt incurred? 2017	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Insurance Premium	
K&D Group	Last 4 digits of account number XXXX	\$3,674.0
Nonpriority Creditor's Name c/o Powers Friedman Linn PLL 23240 Chagrin Blvd #180 Beachwood, OH 44122	When was the debt incurred? 2016	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify apartment lease	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 5 of 10

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Lake Hospital System Inc.	Last 4 digits of account number	xxxx	\$3,000.0			
Nonpriority Creditor's Name  10 East Washington	When was the debt incurred?	2015	·			
Concord, OH 44077  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
■ Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed					
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	_	aration agreement or divorce that you did not				
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts				
□Yes	Other. Specify Medical					
Metro Health Systems	Last 4 digits of account number	xxxx	\$3,000.00			
Nonpriority Creditor's Name 2500 MetroHealth Dr	When was the debt incurred?	2012	ψο,σσσ.σ.			
Cleveland, OH 44109	- As of the data was file the alaim i	in Ol I III I				
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	Is: Check all that apply				
■ Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed					
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts				
□Yes	Other. Specify Medical					
National Cash Advance	Last 4 digits of account number	xxxx	\$800.00			
Nonpriority Creditor's Name 25951 Euclid Ave	When was the debt incurred?	2015	·			
Euclid, OH 44132						
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
■ Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed					
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
☐ Check if this claim is for a community	☐ Student loans					
□ Check if this claim is for a community debt  Is the claim subject to offset?		aration agreement or divorce that you did not				
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
□ Yes	Other. Specify Loan					

Schedule E/F: Creditors Who Have Unsecured Claims

Page 6 of 10

Chaquitta M. Carter	Case number (if known)						
NelNet	Last 4 digits of account number XXXX	\$11,169.00					
Nonpriority Creditor's Name 8015 South Parker Road Aurora, CO 80014	When was the debt incurred? 2007-2015						
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply						
Debtor 1 only	☐ Contingent						
Debtor 2 only	☐ Unliquidated						
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Disputed						
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:						
☐ Check if this claim is for a community	Student loans						
lebt s the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did n report as priority claims	ot					
No	☐ Debts to pension or profit-sharing plans, and other similar debts						
☐Yes	☐ Other. Specify						
	Student Loan						
Ohio University	Last 4 digits of account number XXXX	\$783.58					
Nonpriority Creditor's Name Office of the Bursar	When was the debt incurred?						
Chubb Hall 010							
l Ohio University							
Athens, OH 45701  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply						
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply						
Debtor 1 only	☐ Contingent						
☐ Debtor 2 only	☐ Unliquidated						
☐ Debtor 1 and Debtor 2 only	☐ Disputed						
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:						
☐ Check if this claim is for a community	☐ Student loans						
lebt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did n report as priority claims	ot					
No	Debts to pension or profit-sharing plans, and other similar debts						
☐Yes	Other. Specify  Student Fees	<u> </u>					
Progressive Direct Insurance	Last 4 digits of account number XXXX	\$139.00					
Nonpriority Creditor's Name PO Box 512929	When was the debt incurred? 2016						
Los Angeles, CA 90051 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply						
Who incurred the debt? Check one.	As of the date you me, the claim is. Offect all that apply						
Debtor 1 only	☐ Contingent						
☐ Debtor 2 only	☐ Unliquidated						
☐ Debtor 1 and Debtor 2 only	☐ Disputed						
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:						
☐ Check if this claim is for a community	☐ Student loans						
lebt s the claim subject to offset?	$\hfill \square$ Obligations arising out of a separation agreement or divorce that you did n report as priority claims	ot					
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts						
□Yes	■ Other. Specify Insurance Premium						

Schedule E/F: Creditors Who Have Unsecured Claims

Page 7 of 10

Sprint Nextel Correspondence	Last 4 digits of account number	xxxx	\$500.00
Ionpriority Creditor's Name Attn: Bankruptcy Dept. 3391 Sprint Parkway Overland Park, KS 66251	When was the debt incurred?	2016	
Number Street City State ZIp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community lebt		aration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing	•	
Yes	Other. Specify Cell Service	<b>e</b>	
T-Mobile	Last 4 digits of account number	xxxx	\$278.00
Nonpriority Creditor's Name Bankruptcy Department PO Box 53410	When was the debt incurred?	2013	
Bellevue, WA 98015-3410			
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
$\square$ Check if this claim is for a community	☐ Student loans		
lebt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Cell Service	e	
The Illuminating Company	Last 4 digits of account number	xxxx	\$750.00
Nonpriority Creditor's Name 5001 Nasa Blvd Fairmont, WV 26554	When was the debt incurred?	2017	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other. Specify Utilities		

Schedule E/F: Creditors Who Have Unsecured Claims

Page 8 of 10

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Chaquitta M. Carter		
Furoczy Bonding Company	Last 4 digits of account number XXXX	\$608.0
Nonpriority Creditor's Name 1200 West 3rd Street Cleveland, OH 44113	When was the debt incurred? 2012	-
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
☐Yes	Other. Specify Misc	-
Jniversity Hospitals	Last 4 digits of account number XXXX	\$50.00
Nonpriority Creditor's Name		
c/o First Credit Control 24700 Chagrin Blvd	When was the debt incurred? 2013	-
Beachwood, OH 44122		
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
lebt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical	=
Jniversity Hospitals	Last 4 digits of account number XXXX	\$600.00
Nonpriority Creditor's Name		
11100 Euclid Ave	When was the debt incurred? 2014-2016	-
Cleveland, OH 44106 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
Debtor 1 only	☐ Contingent	
Debtor 2 only	□ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
s the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
☐Yes	■ Other. Specify Medical	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 9 of 10

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US Bank	Last 4 digits of account number XXXX	\$750.00
Nonpriority Creditor's Name		
PO Box 5229	When was the debt incurred? 2012	_
CN-OH-W15 Cincinnati, OH 45201-5229 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did no report as priority claims	t
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Overdraft	

#### Part 3: List Others to Be Notified About a Debt That You Already Listed

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ ———	0.00
	6d.		6d.	Ψ	
	ou.	Other. Add all other priority unsecured claims. Write that amount here.	ou.	<b>&gt;</b>	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	39,089.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	32,994.38
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	72,083.38

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Fill in this infor				
Debtor 1	Chaquitta M. Cart	ter		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF OHIO	
Case number				
(if known)				Check if this is an amended filing

## Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

.1 Shoregate Towers 30901 Lakeshore Blvd #1102 Eastlake, OH 44095 Apartment Lease, expires 6/2019

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

Fill in this	s information to identify your	case:			
Debtor 1	Chaquitta M. Car	ter			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case num (if known)	ber				☐ Check if this is an amended filing
Officia	ll Form 106H				
	dule H: Your Cod	ebtors			12/15
ill it out, a your name		boxes on the left. Attack ). Answer every question	n the Additional Page t	to this page. On the top	eeded, copy the Additional Page, o of any Additional Pages, write
■ No					
	thin the last 8 years, have yona, California, Idaho, Louisiana				y states and territories include
	. Go to line 3. s. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in line Form	e 2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	sure you have listed th	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1	Name			Schedule D, line	
	Name			☐ Schedule E/F, li ☐ Schedule G, line	·
-	Number Street City	State	ZIP Code	_	
3.2				☐ Schedule D, line	е
	Name			☐ Schedule E/F, li	ine
-	Number Street City	State	ZIP Code	_	

Schedule H: Your Codebtors

Fill	in this information to identify you	ır case:									
Del	otor 1 Chaquitta	M. Carter									
	otor 2 ouse, if filing)										
Uni	ted States Bankruptcy Court for	the: NORTHERN DISTRIC	CT OF OHIO	)							
	se number nown)		-						ed filing ent showir	ng postpetition ollowing date:	
0	fficial Form 106I						Ī	/IM / DD/ Y	/YYY		
S	chedule I: Your In	come									12/15
sup spo atta	as complete and accurate as p plying correct information. If y use. If you are separated and y ch a separate sheet to this for t1:  Describe Employme	ou are married and not fili your spouse is not filing w m. On the top of any additi	ng jointly, a ith you, do	and your spo not include i	use nfor	is liv matic	ing with on abou	you, incl t your spo	ude infori ouse. If m	mation about ore space is	your needed,
1.	Fill in your employment information.		Debtor 1					Debtor 2	2 or non-f	iling spouse	
	If you have more than one job	Employment status	■ Emplo	■ Employed				☐ Employed			
	attach a separate page with information about additional	Employment status	☐ Not employed					☐ Not employed			
	employers.	Occupation	RN	RN							
	Include part-time, seasonal, or self-employed work.	Employer's name	Univers	sity Hospita	l						
	Occupation may include stude or homemaker, if it applies.	nt Employer's address		Euclid Ave Ind, OH 4410	06						
		How long employed t	here?	2 1/2 years	6			_			
Par	t 2: Give Details About I	Monthly Income									
spou If yo	mate monthly income as of thuse unless you are separated.  u or your non-filing spouse have e space, attach a separate shee	more than one employer, co	•	0 1		,	•	that perso	on on the l	ines below. If y	Ü
2.	List monthly gross wages, s deductions). If not paid month				2.	\$	6	5,100.00	\$	ing spouse	
3.	Estimate and list monthly ov	ertime pay.			3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Ad	d line 2 + line 3.			4.	\$	6,1	00.00	\$	N/A	

				F	or Debtor 1		r Debtor 2 n-filing sp		
	Copy	y line 4 here	4.	\$	6,100.00		ii iiiiig op	N/A	
_		- University de desertions							-
5.		all payroll deductions:	_	_					
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$				N/A	-
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	- : -		N/A	-
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00			N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$	100.00			N/A	_
	5e.	Insurance	5e.	\$	387.00			N/A	-
	5f.	Domestic support obligations	5f.	\$				N/A	
	5g.	Union dues	5g.	\$	0.00			N/A	-
	5h.	Other deductions. Specify:	_ 5h.⊣	⊦ \$	0.00	_ + \$ _		N/A	=
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,473.00	_ \$_		N/A	-
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	4,627.00	_ \$_		N/A	_
8.	List a 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$		N/A	
	8b.	Interest and dividends	8b.	\$	0.00	- '-		N/A	-
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce		Ť		- *-		1971	-
		settlement, and property settlement.	8c.	\$	257.00	\$		N/A	
	8d.	Unemployment compensation	8d.	\$	0.00	- \$		N/A	
	8e.	Social Security	8e.	\$	0.00	\$		N/A	-
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$		N/A	
	8g.	Pension or retirement income	8g.	\$	0.00	\$		N/A	-
	8h.	Other monthly income. Specify:	8h.+	⊦ \$	0.00	+ \$		N/A	=
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	257.00	\$_		N/A	<b>A</b>
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	_	4,884.00 +	<b>.</b>	N/A =	\$_	4,884.00
11.	State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$							0.00	
12.		e that amount on the Summary of Schedules and Statistical Summary of Certain	of line 10 to the amount in line 11. The result is the combined monthly income.  Schedules and Statistical Summary of Certain Liabilities and Related Data, if it  12. \$ 4,884.00						
13.	Do y	ou expect an increase or decrease within the year after you file this form No.	?					Combii nonthl	ned y income
	=	Voc Evoloin:							-

Official Form 106I Schedule I: Your Income page 2

Fill	in this information to identify your case:					
Deb	otor 1 Chaquitta M. Carter		Ch	eck if this is	s:	
	Onaquitta III. Garter			An amen		
	otor 2					ving postpetition chapter
(Spo	ouse, if filing)			13 expen	ises as of t	the following date:
Unit	ted States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO			MM / DD	/ YYYY	
Cas	se number					
(If k	nown)					
0	fficial Form 106J					
S	chedule J: Your Expenses					12/15
Be info	as complete and accurate as possible. If two married people are primation. If more space is needed, attach another sheet to this funder (if known). Answer every question.					
Par 1.	t 1: Describe Your Household Is this a joint case?					
١.						
	No. Go to line 2.					
	Yes. Does Debtor 2 live in a separate household?					
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i>	for Separate Househo	old of De	ebtor 2.		
2.	Do you have dependents? ☐ No					
	Do not list Debtor 1 and Debtor 2.  Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		Deper age	ndent's	Does dependent live with you?
	Do not state the					□ No
	dependents names.	Son		3		■ Yes
						□ No
		Daughter		10		■ Yes
						□ No
		friend's daughte	er	13		Yes
						□ No
_						☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?					
	t 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless you	ou are using this for	m as a	sunnlemen	t in a Cha	nter 13 case to report
exp	penses as of a date after the bankruptcy is filed. If this is a suppl plicable date.					
	lude expenses paid for with non-cash government assistance if					
	value of such assistance and have included it on <i>Schedule I: Yo</i> ficial Form 106I.)	our Income			Your expe	enses
			_			
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	4.	\$		860.00
	If not included in line 4:					
	4a. Real estate taxes		4a.	\$		0.00
	4b. Property, homeowner's, or renter's insurance		4b.			0.00
	4c. Home maintenance, repair, and upkeep expenses		4c.	\$		0.00
_	4d. Homeowner's association or condominium dues		4d.			0.00
5	Additional mortgage nayments for your residence, such as hon	na aguity lagne	5	2		0.00

Official Form 106J Schedule J: Your Expenses page 2

Fill in this info	rmation to identify you	r case:			
Debtor 1	Chaquitta M. Ca				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	Sankruptcy Court for the:	NORTHERN DISTRICT OF C	HIO		
Case number (if known)				☐ Check if this is amended filing	
	m 106Dec	an Individual De	htoric Sobo	dulos	
<del>Declai a</del>	tion About	an marvidual De	blui 3 3cme	tuies	12/15
ears, or both.	18 U.S.C. §§ 152, 1341, gn Below		,	es up to \$250,000, or imprisonment for u	
Did you p	ay or agree to pay som	eone who is NOT an attorney to	o help you fill out bankr	ruptcy forms?	
■ No					
☐ Yes.	Name of person			Attach Bankruptcy Petition Preparer's  Declaration, and Signature (Official Fo	
that they a	re true and correct. naquitta M. Carter	e that I have read the summary	x		
	uitta M. Carter ure of Debtor 1		Signature of Debt	or 2	

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

Date \_\_\_\_

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Date **January 9, 2019** 

Best Case Bankruptcy

Fill	l in this inforn	nation to identify yo	ur case:					
De	btor 1	Chaquitta M. C	arter					
Da	htor O	First Name	Middle Name		Last Name	_		
1 -	btor 2 ouse if, filing)	First Name	Middle Name		Last Name			
Un	ited States Bar	nkruptcy Court for the	: NORTHERN DISTRICT	r of ohic	)			
Ca	se number							
	nown)						_	heck if this is an mended filing
							ui	neriaca ming
Of	ficial Fo	rm 107						
			Affairs for Indiv	iduals	Filing for B	ankruptcy		4/16
			sible. If two married people				ble for supr	
info	rmation. If m		d, attach a separate sheet t					
		,						
Pa	rt 1: Give D	etails About Your M	larital Status and Where Yo	ou Lived I	Before			
1.	What is your	r current marital stat	tus?					
	☐ Married							
	■ Not mar	ried						
2.	During the la	ast 3 years, have yo	u lived anywhere other tha	ın where \	ou live now?			
	_							
	□ No ■ Year Lin	t all of the places you	lived in the last 3 years. Do	not inclus	lo whore you live now	,		
	Tes. Lis	t all of the places you	Tilved in the last 5 years. Do	not includ	le where you live now	<i>.</i>		
	Debtor 1 Pr	ior Address:	Dates Debtor lived there	1	Debtor 2 Prior Ad	ldress:		Dates Debtor 2 lived there
	27400 Cha	ardon Road	From-To:		☐ Same as Debtor	1		☐ Same as Debtor 1
	Wickliffe,	OH 44092	December 2 August 2016					From-To:
		wood Road eights, OH 44125	From-To: August 2016 May 2017	6-	☐ Same as Debtor	1		☐ Same as Debtor 1 From-To:
3.			ever live with a spouse or I					
stat	es and territori	es include Arizona, C	alifornia, Idaho, Louisiana, N	vevada, N	ew Mexico, Puerto R	ico, Texas, wasnir	igton and wi	isconsin.)
	No							
	☐ Yes. Ma	ike sure you fill out So	chedule H: Your Codebtors (	Official Fo	orm 106H).			
Pa	rt 2 Explai	n the Sources of Yo	ur Income					
4.	Fill in the tota	al amount of income y	employment or from operated are received from all jobs and un have income that you rece	d all busin	esses, including part	time activities.	vious calen	dar years?
	□ No							
	_	in the details.						
			Debtor 1			Debtor 2		
			Sources of income	Gros	ss income	Sources of inco	ome	Gross income
			Check all that apply.	(befo	ore deductions and usions)	Check all that ap		(before deductions and exclusions)

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

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Best Case Bankruptcy

\* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Del	otor 1	Chaquitta M. Carter		Case number	(if known)	
11.	accou	<b>nts or refuse to make a payment b</b> o		did any creditor, including a bank or financial ins you owed a debt?	stitution, set off any	amounts from your
	□ Y	es. Fill in the details.				
	Credi	tor Name and Address	Des	scribe the action the creditor took	Date action was taken	Amount
12.	court-a	appointed receiver, a custodian, o		as any of your property in the possession of an a er official?	assignee for the ben	efit of creditors, a
Par		List Certain Gifts and Contribution	าร			
13.	■ N	•	ruptcy, d	lid you give any gifts with a total value of more t	han \$600 per person	?
	Gifts with a total value of more than \$600 per person			Describe the gifts	Dates you gave the gifts	Value
	Perso Addre	on to Whom You Gave the Gift and ess:	l			
14.	□ N ■ Y	•	contributi	on.  Describe what you contributed	Il value of more than  Dates you	\$600 to any charity?
	more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)			Describe what you contributed	contributed	Value
	chur					\$2,400.00
Par	t 6:	List Certain Losses				
15.		1 year before you filed for bankrunbling?	iptcy or	since you filed for bankruptcy, did you lose anyt	thing because of the	ft, fire, other disaster,
	□ N	0				
	Y	es. Fill in the details.				
		ribe the property you lost and he loss occurred	Include	the amy insurance coverage for the loss the amount that insurance has paid. List pending ce claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
		Pontiac G6 r Vehicle Accident		Insurance paid for totaling vehicle	9-24-18	\$2,400.00
Par	t 7:	List Certain Payments or Transfer	s			
16.	consu	Ited about seeking bankruptcy or	preparin	d you or anyone else acting on your behalf pay on go a bankruptcy petition? s, or credit counseling agencies for services required		erty to anyone you
	□ N	0				
	_	es. Fill in the details.				
				Description and value of any property	Data navement	Amaint of
	Addre Email	on Who Was Paid ess or website address on Who Made the Payment, if Not \	You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 4

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	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and v transferred	alue of any prop	erty	Date payment or transfer was made	Amount of payment		
	Freeburg & Freeburg Law Firm, LPA 6690 Beta Drive Suite 214 Mayfield Village, OH 44143				12-13-18	\$1,100.00		
17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you l	or to make payments			or transfer any prop	erty to anyone who		
	<ul><li>No</li><li>Yes. Fill in the details.</li></ul>							
	Person Who Was Paid Address	Description and v transferred	alue of any prop	erty	Date payment or transfer was made	Amount of payment		
18	Within 2 years before you filed for bankruptcy	, did you sell trade o	r otherwise trans	sfer any pror	nerty to anyone, oth	er than property		
10.	transferred in the ordinary course of your bus include both outright transfers and transfers mad include gifts and transfers that you have already  No  Yes. Fill in the details.	siness or financial affa e as security (such as t	<b>iirs?</b> he granting of a s					
	Person Who Received Transfer Address		property transferred payments		any property or received or debts	Date transfer was made		
	Person's relationship to you			paid in exchange				
<ul> <li>19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which beneficiary? (These are often called asset-protection devices.)</li> <li>■ No</li> <li>□ Yes. Fill in the details.</li> </ul>				of which you are a				
	Name of trust Description and value of the property transferred					Date Transfer was made		
Par	List of Certain Financial Accounts, Insti	ruments, Safe Deposit	Boxes, and Sto	rage Units				
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or	other financial accour	nts; certificates o	of deposit; sh				
	houses, pension funds, cooperatives, associa  No	ations, and other finan	icial institutions.	•				
	Yes. Fill in the details.							
		ast 4 digits of account number	Type of accour instrument	clo mo	ite account was osed, sold, oved, or insferred	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ar before you filed for	bankruptcy, any	<i>ı</i> safe deposi	t box or other depo	sitory for securities,		
	No							
	Yes. Fill in the details.  Name of Financial Institution	Who else had acc	oss to it?	Describe the	contents	Do you still		
	Address (Number, Street, City, State and ZIP Code)	Address (Number, State and ZIP Code)		Jeschibe uie	Contents	have it?		

Statement of Financial Affairs for Individuals Filing for Bankruptcy

22.	Have you stored property in a storage unit or p	place other than your home within 1	year before you filed for bankruptcy	?
	■ No			
	Yes. Fill in the details.			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control for	Someone Else		
23.	Do you hold or control any property that some for someone.	one else owns? Include any proper	ty you borrowed from, are storing for	, or hold in trust
	■ No □ Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Par	t 10: Give Details About Environmental Inform	nation		
For	the purpose of Part 10, the following definitions	s apply:		
	Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these su	air, land, soil, surface water, groun	• • • • • • • • • • • • • • • • • • • •	
	Site means any location, facility, or property as to own, operate, or utilize it, including disposa		law, whether you now own, operate, o	or utilize it or used
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		s waste, hazardous substance, toxic s	substance,
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of whe	n they occurred.	
24.	Has any governmental unit notified you that yo	ou may be liable or potentially liable	under or in violation of an environme	ental law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	y release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or admin	istrative proceeding under any env	ironmental law? Include settlements a	and orders.
	■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Par	t 11: Give Details About Your Business or Co	nnections to Any Business		
27.	Within 4 years before you filed for bankruptcy,	•		/ business?
	☐ A sole proprietor or self-employed in a		•	
	☐ A member of a limited liability company		,	
		of Financial Affairs for Individuals Filing	g tor Bankruptcy	page 6
SOITW	are Copyright (c) 1996-2018 Best Case, LLC - www.bestcase.com			Best Case Bankruptcy

19-10199-aih Doc 1 FILED 01/14/19 ENTERED 01/14/19 15:29:16 Page 42 of 57

Debtor 1		Chaquitta M. Carter		Case number (if known)		
		•				
		☐ A partner in a partnership				
		☐ An officer, director, or managing ex	ecutive of a corporation			
		☐ An owner of at least 5% of the votin	g or equity securities of a corporation			
		No. None of the above applies. Go to F	Part 12.			
		Yes. Check all that apply above and fill	in the details below for each business.			
	Add	siness Name dress	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.		
	(Nun	nber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed		
28.		nin 2 years before you filed for bankrupt tutions, creditors, or other parties.	cy, did you give a financial statement to	o anyone about your business? Include all financial		
		No				
		Yes. Fill in the details below.				
		me dress nber, Street, City, State and ZIP Code)	Date Issued			
Par	t 12:	Sign Below				
are t	rue a a ba		false statement, concealing property, o	d I declare under penalty of perjury that the answers or obtaining money or property by fraud in connection years, or both.		
		quitta M. Carter				
		tta M. Carter re of Debtor 1	Signature of Debtor 2			
Dat	e <u>J</u>	lanuary 9, 2019	Date			
Did : ■ N □ Y	lo	attach additional pages to Your Stateme	ent of Financial Affairs for Individuals F	iling for Bankruptcy (Official Form 107)?		
<b>■</b> N	lo .	Day or agree to pay someone who is not lame of Person Attach the Bankru	, ,,	•		

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Fill in this infor	mation to identify your ca	se:		
Debtor 1	Chaquitta M. Carte	•		
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DIST	TRICT OF OHIO	
Case number				
(if known)				Check if this is an amended filing
Official Ca	arma 400			
Official Fo		for Indiv	iduals Filing Under Chapt	er 7 12/15
If you are an ind	lividual filing under chapt	er 7, you must fill	out this form if:	
	e claims secured by your			
You must file th	ever is earlier, unless the	nin 30 days after y	ot expired. you file your bankruptcy petition or by the date s e time for cause. You must also send copies to the	
	eople are filing together in nd date the form.	n a joint case, bot	th are equally responsible for supplying correct	information. Both debtors must
	and accurate as possible our name and case numb		needed, attach a separate sheet to this form. Or	n the top of any additional pages,
Part 1: List Y	our Creditors Who Have S	Secured Claims		
For any credit information b		1 of Schedule D:	: Creditors Who Have Claims Secured by Proper	ty (Official Form 106D), fill in the
	reditor and the property tha	t is collateral	What do you intend to do with the property the secures a debt?	at Did you claim the property as exempt on Schedule C?
	Credit Acceptance		Surrender the property.	■ No
name:			☐ Retain the property and redeem it. ☐ Retain the property and enter into a	□Yes
Description of		n 135,000	Reaffirmation Agreement.	
property securing debt	miles :		☐ Retain the property and [explain]:	_
Creditor's	Progresive Finance		☐ Surrender the property.	□No
name:			Retain the property and redeem it.	=
	Sectional and chair		Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property			Retain the property and [explain]:	
securing debt	•		avoid lien using 11 U.S.C. § 522(f)	

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 1

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Best Case Bankruptcy

Debtor 1	Chaquitta M. Carter	Case number (if known)	
	on of leased	С	] No
Property:			] Yes
Lessor's r	name: on of leased		] No
Property:			] Yes
Lessor's r	name: on of leased		] No
Property:	in or leased		] Yes
Lessor's r	name: on of leased		] No
Property:			] Yes
Lessor's r	name: on of leased		] No
Property:	in or leased		] Yes
Lessor's r	name: on of leased		] No
Property:	on or leased		] Yes
Lessor's r	name: on of leased		] No
Property:			] Yes
Part 3:	Sign Below		
Under per property t	nalty of perjury, I declare that I have indicated my intention about any pro hat is subject to an unexpired lease.	perty of my estate that secu	res a debt and any personal
χ /s/ (	Chaquitta M. Carter X		
	quitta M. Carter Signature of Debtor 1	e of Debtor 2	
Date	January 9, 2019 Date		

Statement of Intention for Individuals Filing Under Chapter 7

page 2

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Fill ir	this information to identify your case:					irected in this form and	in Form
Debt	or 1 Chaquitta M. Carter		122	2A-1Sı	rbb:		
Debt (Spou	or 2			■ 1. T	here is no pres	umption of abuse	
	ed States Bankruptcy Court for the: Northern District o	f Ohio	'		applies will be m	o determine if a presun nade under <i>Chapter 7 I</i> icial Form 122A-2).	•
Case (if kno	e number		,	_	,	,	,
(ii kiio	,					does not apply now be service but it could ap	
				☐ Ch	eck if this is a	n amended filing	
Off	icial Form 122A - 1						
Ch	apter 7 Statement of Your Cur	rent Mo	nthly Inc	om	е		12/15
attach case r	complete and accurate as possible. If two married people as a separate sheet to this form. Include the line number to what was a separate sheet to this form. Include the line number to what was a separate sheet to this form. Include the line number to what was a separate sheet to the separate sheet and file Statement of Exempts.  1: Calculate Your Current Monthly Income	hich the addition mapped with the mapped with	nal information a of abuse becau	applies se you	On the top of an do not have prin	ny additional pages, write narily consumer debts o	e your name and r because of
1.	What is your marital and filing status? Check one or	ıly.					
	■ Not married. Fill out Column A, lines 2-11.						
	☐ Married and your spouse is filing with you. Fill ou	at both Columns	A and B, lines	2-11.			
	$\hfill\square$ Married and your spouse is NOT filing with you.	You and your	spouse are:				
	☐ Living in the same household and are not lega	Illy separated.	Fill out both Co	lumns	A and B, lines 2	2-11.	
	☐ Living separately or are legally separated. Fill of penalty of perjury that you and your spouse are living apart for reasons that do not include evading	egally separate	d under nonban	kruptc	y law that applie	es or that you and your	
10 the	I in the average monthly income that you received from all 1(10A). For example, if you are filing on September 15, the 6-me 6 months, add the income for all 6 months and divide the total buses own the same rental property, put the income from that p	onth period would by 6. Fill in the re	d be March 1 throus sult. Do not includ	ugh Aug de any i	gust 31. If the amo	ount of your monthly incomore than once. For example	e varied during le, if both
				Colur Debte		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	and commission	ons (before all	\$	6,692.87	\$	
3.	<b>Alimony and maintenance payments.</b> Do not include Column B is filled in.	payments from	a spouse if	\$	0.00	\$	
	All amounts from any source which are regularly pa of you or your dependents, including child support. from an unmarried partner, members of your household and roommates. Include regular contributions from a sp filled in. Do not include payments you listed on line 3.	Include regula d, your depende	r contributions ents, parents,	\$	286.17	\$	
5.	Net income from operating a business, profession,						
			otor 1				
I	Gross receipts (before all deductions)	\$ 0.00					
1	Ordinary and necessary operating expenses	-\$ 0.00		Φ.	0.00	¢.	
I	Net monthly income from a business, profession, or far	m \$	Copy here ->	<b>&gt;</b>	0.00	\$	
6.	Net income from rental and other real property	Del	otor 1				
	Cross receipts (before all deductions)	\$ 0.00					
	Gross receipts (before all deductions)	-\$ 0.00					
	Ordinary and necessary operating expenses  Net monthly income from rental or other real property.	· ·	Copy here ->	\$	0.00	\$	

Official Form 122A-1

**Chapter 7 Statement of Your Current Monthly Income** 

page 1

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7. Interest, dividends, and royalties

0.00

				Column A Debtor 1		Column B  Debtor 2 or non-filing sp		
8.	Unemployment compensation			\$	0.00	\$		
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	received was a benef	it under	·		· -		
	For you \$ For your spouse \$	0.0	00					
	For your spouse \$							
9.	<b>Pension or retirement income.</b> Do not include any ambenefit under the Social Security Act.	nount received that wa	s a	\$	0.00	\$		
10.	Income from all other sources not listed above. Spe Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hur domestic terrorism. If necessary, list other sources on a total below.	Security Act or paymen manity, or international	ts or	•		0		
	•			\$	0.00	\$		
				\$	0.00	\$		
	Total amounts from separate pages, if any.		+	\$	0.00	\$		
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the Column A t		\$	6,979.04	<b>+</b> \$		= \$	5,979.04
Part	2: Determine Whether the Means Test Applies to	o You					Total cur income	rent monthly
12.	Calculate your current monthly income for the year.	. Follow these steps:						
	12a. Copy your total current monthly income from line 1	1		Сору	line 11 h	nere=>	\$	6,979.04
	Multiply by 12 (the number of months in a year)						x 12	
	12b. The result is your annual income for this part of the	e form				12b.	\$83	3,748.48
13.	Calculate the median family income that applies to	you. Follow these step	s:					
	Fill in the state in which you live.	ОН						
	Fill in the number of people in your household.	4						
	Fill in the median family income for your state and size					13.	\$87	7,321.00
	To find a list of applicable median income amounts, go for this form. This list may also be available at the bank		pecified	in the separa	te instruc	tions		
14.	How do the lines compare?							
	<ul><li>Line 12b is less than or equal to line 13. Of Go to Part 3.</li></ul>	n the top of page 1, ch	eck box	1, There is r	o presum	ption of abuse	·.	
	14b.  Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2,	The pre	esumption of	abuse is	determined by	Form 122	A-2.
Part	3: Sign Below							
	By signing here, I declare under penalty of perjury	that the information or	n this sta	atement and i	n any atta	achments is tru	e and cor	rect.
	χ /s/ Chaquitta M. Carter							
	Chaquitta M. Carter Signature of Debtor 1							
	Date January 9, 2019 MM / DD / YYYY							
	If you checked line 14a, do NOT fill out or file Forn	n 122A-2.						
	If you checked line 14b, fill out Form 122A-2 and fi	le it with this form.						
	•							

Official Form 122A-1

**Chapter 7 Statement of Your Current Monthly Income** 

page 2

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### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Debtor 1

Income for the Period 07/01/2018 to 12/31/2018.

### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: University Hospitals

Year-to-Date Income:

Starting Year-to-Date Income: \$32,111.10 from check dated 6/28/2018. Ending Year-to-Date Income: \$72,268.33 from check dated 12/27/2018.

Income for six-month period (Ending-Starting): \$40,157.23 .

Average Monthly Income: \$6,692.87.

#### Line 4 - Child support income (including foster care and disability)

Source of Income: Child Support

Income by Month:

6 Months Ago:	07/2018	\$310.00
5 Months Ago:	08/2018	\$310.00
4 Months Ago:	09/2018	\$257.00
3 Months Ago:	10/2018	\$257.00
2 Months Ago:	11/2018	\$291.52
Last Month:	12/2018	\$291.52
	Average per month:	\$286.17

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	¢310	total foo

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### United States Bankruptcy Court Northern District of Ohio

In	re Chaquitta M. Carter		Case N	0.		
	·	Debtor(s)	Chapte	<b>7</b>		
	DISCLOSURE OF COMPI	ENSATION OF ATTO	RNEY FOR	DEBTOR(S)		
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:					
	For legal services, I have agreed to accept		\$	1,100.00		
	Prior to the filing of this statement I have receive	d	\$	1,100.00		
	Balance Due			0.00		
2.	The source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
3.	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
4.	■ I have not agreed to share the above-disclosed corr	npensation with any other perso	n unless they are m	embers and associat	es of my law firm.	
	☐ I have agreed to share the above-disclosed competed copy of the agreement, together with a list of the results.				my law firm. A	
5.	In return for the above-disclosed fee, I have agreed to	render legal service for all aspe	cts of the bankrupto	ey case, including:		
	<ul> <li>a. Analysis of the debtor's financial situation, and ren</li> <li>b. Preparation and filing of any petition, schedules, st</li> <li>c. Representation of the debtor at the meeting of cred</li> <li>d. [Other provisions as needed]</li> <li>Negotiations with secured creditors to reaffirmation agreements and applicate 522(f)(2)(A) for avoidance of liens on he</li> </ul>	atement of affairs and plan which litors and confirmation hearing, o reduce to market value; ex- tions as needed; preparatio	ch may be required; and any adjourned be emption planni	nearings thereof;	nd filing of	
6.	By agreement with the debtor(s), the above-disclosed Representation of the debtors in any cany other adversary proceeding.			nces, relief from	stay actions or	
		CERTIFICATION				
this	I certify that the foregoing is a complete statement of a bankruptcy proceeding.	any agreement or arrangement for	or payment to me for	or representation of t	the debtor(s) in	
	January 9, 2019	/s/ Antoinette E.				
Date			Antoinette E. Freeburg 0071075 Signature of Attorney			
		Freeburg & Free				
		6690 Beta Dr.	•			
		Suite 214 Mayfield Village	OH 44143			
			Fax: (440) 421-9	184		
		toni@freeburgla				
		Name of law firm				

### United States Bankruptcy Court Northern District of Ohio

In re	Chaquitta M. Carter		Case No.	
		Debtor(s)	Chapter	7
	VER	IFICATION OF CREDITOR	MATRIX	
The ab	ove-named Debtor hereby verifies	that the attached list of creditors is true and c	correct to the best	of his/her knowledge.
Date:	January 9, 2019	/s/ Chaquitta M. Carter		
		Chaquitta M. Carter		
		Signature of Debtor		

Advance America Attn: Bankruptcy Department 135 North Church Street Spartanburg, SC 29306

Brecksville Surgury Center 7001 South Edgerton Road Brecksville, OH 44141

Chamberlin College of Nursing 6700 Euclid Ave #201 Cleveland, OH 44103

Citizens Bank 10561 Telegraph Road Glen Allen, VA 23059

Cleveland Eye Institute 320 Broadway Ave Bedford, OH 44146

Cornerstone Marriage and Family 2490 Lee Blvd Cleveland, OH 44118

Credit Acceptance PO Box 513 Southfield, MI 48037

Dominion East Ohio Gas PO Box 5759 Cleveland, OH 44101

Dominion Management 2905 Northwest Blvd # 1150 Minneapolis, MN 55441

Federal Loan Servicing PO Box 60610 Harrisburg, PA 17106

Fifth Third Bank 5050 Kingsley Drive Cincinnati, OH 45227 First Premier Bank 601 South Minnesota Ave Sioux Falls, SD 57104

GEICO One GEICO Plaza Bethesda, MD 20811

K&D Group c/o Powers Friedman Linn PLL 23240 Chagrin Blvd #180 Beachwood, OH 44122

Lake Hospital System Inc. 10 East Washington Concord, OH 44077

Metro Health Systems 2500 MetroHealth Dr Cleveland, OH 44109

National Cash Advance 25951 Euclid Ave Euclid, OH 44132

NelNet 3015 South Parker Road Aurora, CO 80014

Ohio University Office of the Bursar Chubb Hall 010 1 Ohio University Athens, OH 45701

Progresive Finance 256 Data Drive Draper, UT 84020

Progressive Direct Insurance PO Box 512929 Los Angeles, CA 90051 Sprint Nextel Correspondence Attn: Bankruptcy Dept. 6391 Sprint Parkway Overland Park, KS 66251

T-Mobile
Bankruptcy Department
PO Box 53410
Bellevue, WA 98015-3410

The Illuminating Company 5001 Nasa Blvd Fairmont, WV 26554

Turoczy Bonding Company 1200 West 3rd Street Cleveland, OH 44113

University Hospitals c/o First Credit Control 24700 Chagrin Blvd Beachwood, OH 44122

University Hospitals 11100 Euclid Ave Cleveland, OH 44106

US Bank PO Box 5229 CN-OH-W15 Cincinnati, OH 45201-5229